

April 3, 2014

Los Angeles County Board of Supervisors

> Gloria Molina First District

TO:

Each Supervisor

Mark Ridley-Thomas Second District FROM: 6

Mitchell H. Katz, M.D.

Director

Zev Yaroslavsky Third District

SUBJECT:

STATUS REPORT ON KEY INDICATORS OF

PROGRESS, HOSPITAL OPERATIONS, AND OTHER ISSUES RELATED TO THE TRANSITION TO THE NEW LAC+USC MEDICAL CENTER – PROGRESS

REPORT #98

Don Knabe Fourth District

Michael D. Antonovich
Fifth District

Mitchell H. Katz, M.D.

Director

Hal F. Yee, Jr., M.D., Ph.D. Chief Medical Officer

Christina R. Ghaly, M.D. Deputy Director, Strategic Planning

313 N. Figueroa Street, Suite 912 Los Angeles, CA 90012

> Tel: (213)240-8101 Fax: (213) 481-0503

www.dhs.lacounty.gov

This is to provide your Board with the monthly report on the status of transitioning to the new LAC+USC Medical Center (LAC+USC). This report is the full monthly operational report with trends to include the month of February 2014.

Census Trending (ADC includes Psychiatric & Newborn Patients)

The Average Daily Census (ADC) for the month of February was 555 out of 676 licensed beds, an estimated 80% utilization rate (82% occupancy). The census for Medical/Surgical units was an estimated 89% utilization rate (91% occupancy) for February 2014.

## **Emergency Department (ED) Indicators**

The attachment demonstrates a decrease in the ED wait times, ED boarding times, the rate of patients who left without being seen (LWBS), and number of patients transferred out in comparison to January 2014. The average daily census (ADC) for this period was stable. The Dangerously Overcrowding Level Comparison for February 2014 was 6% compared to 26.3% in January 2014.

If you have any questions or need additional information, please contact me or Dan Castillo, LAC+USC Chief Executive Officer, at (323) 409-2800.

DC:ab

Attachment

C:

Chief Executive Office County Counsel

Executive Office, Board of Supervisors

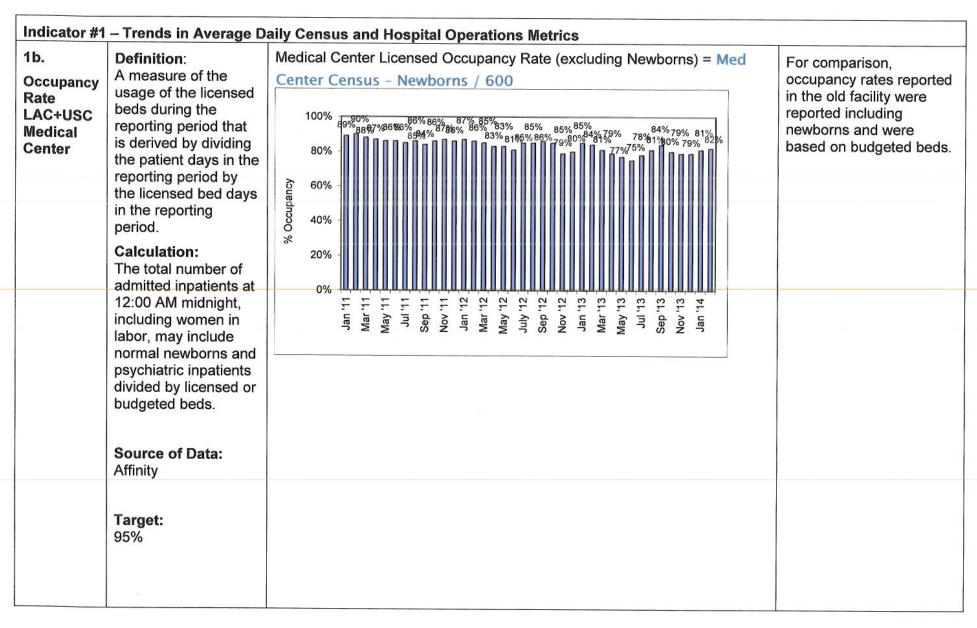
patient-centered, cost-effective health care to Los Angeles County residents through direct services at DHS facilities and through collaboration with community and university partners.

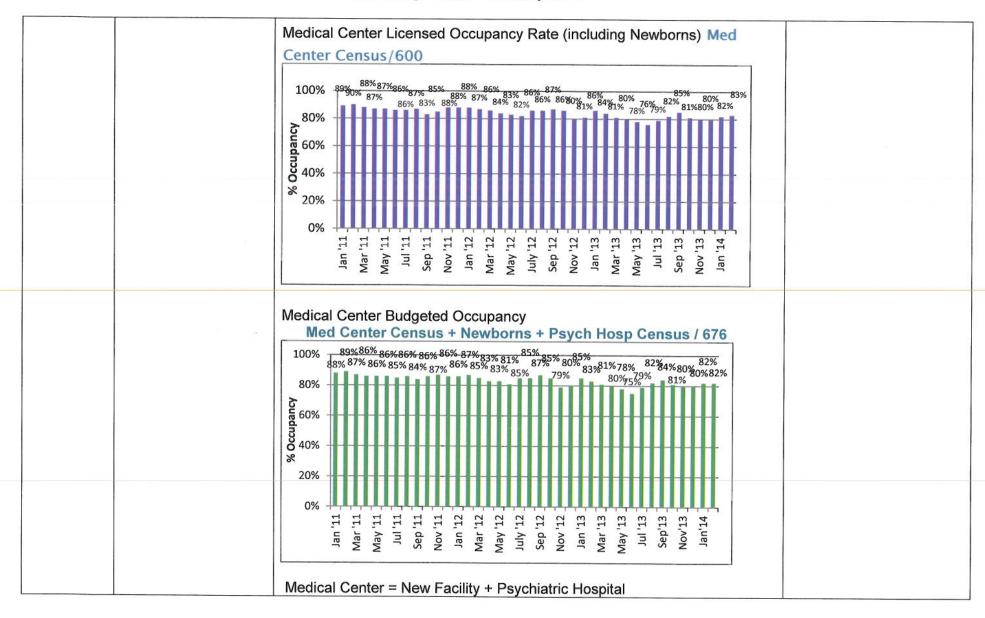
To ensure access to high-quality.

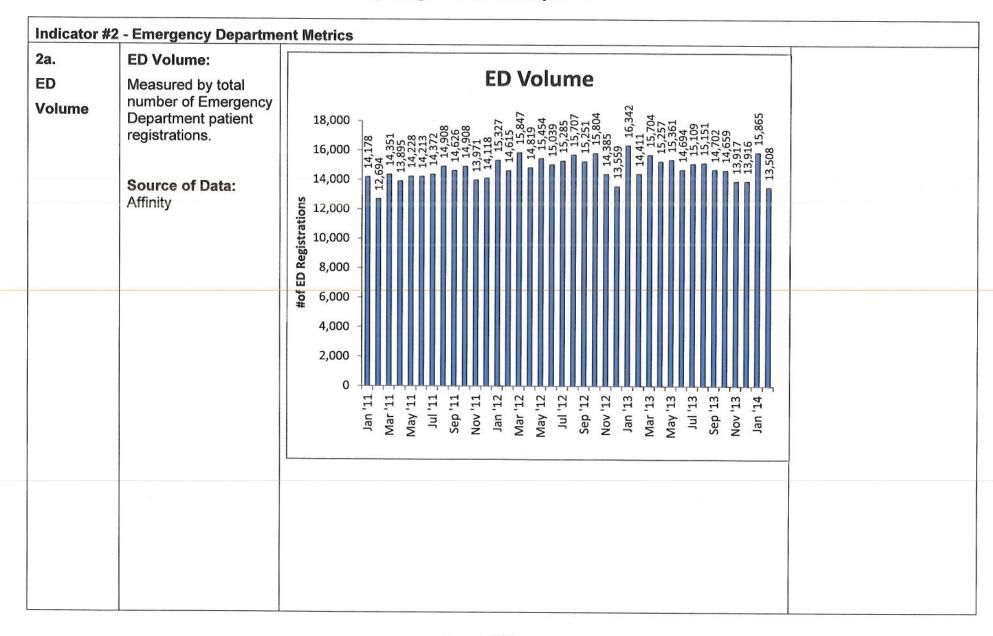


www.dhs.lacounty.gov

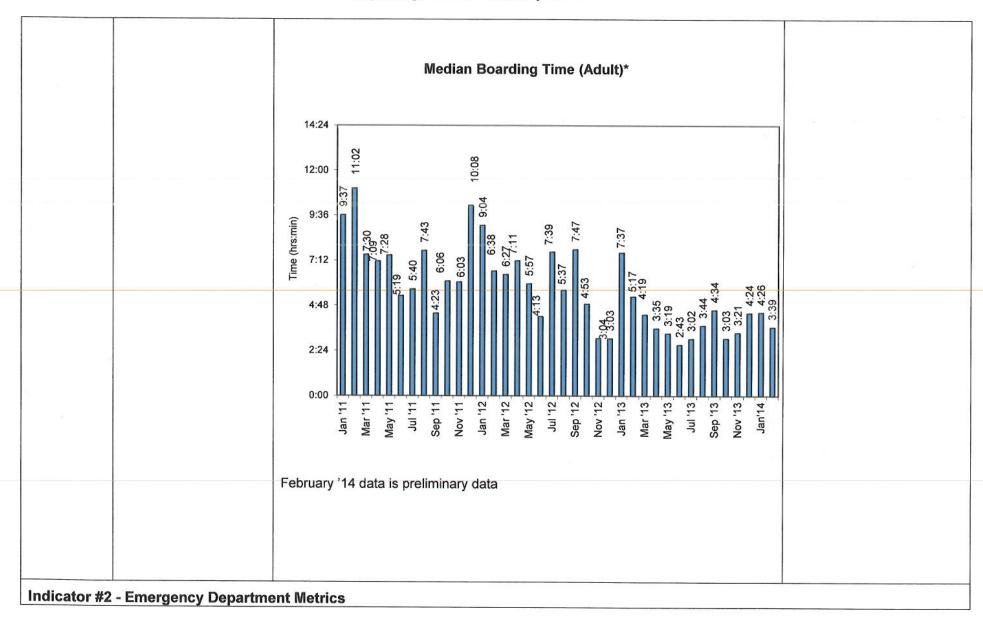
Indicator	Definition	Data	Comments
Indicator #1	- Trends in Average D	aily Census and Hospital Operations Metrics	
1a. Average Daily Census (ADC)	ADC: A measure of the total number of inpatients occupying licensed beds on a daily basis reported as the arithmetic mean.  Calculation: Total number of admitted inpatients at 12:00 AM midnight daily, summed over the month and divided by the total number of days in the month.  Source of Data: Affinity	ADC  ADC  ADC  ADC  ADC  ADC  ADC  ADC	ADC provided as background information.  Graphs depict data from January 2011 to present.

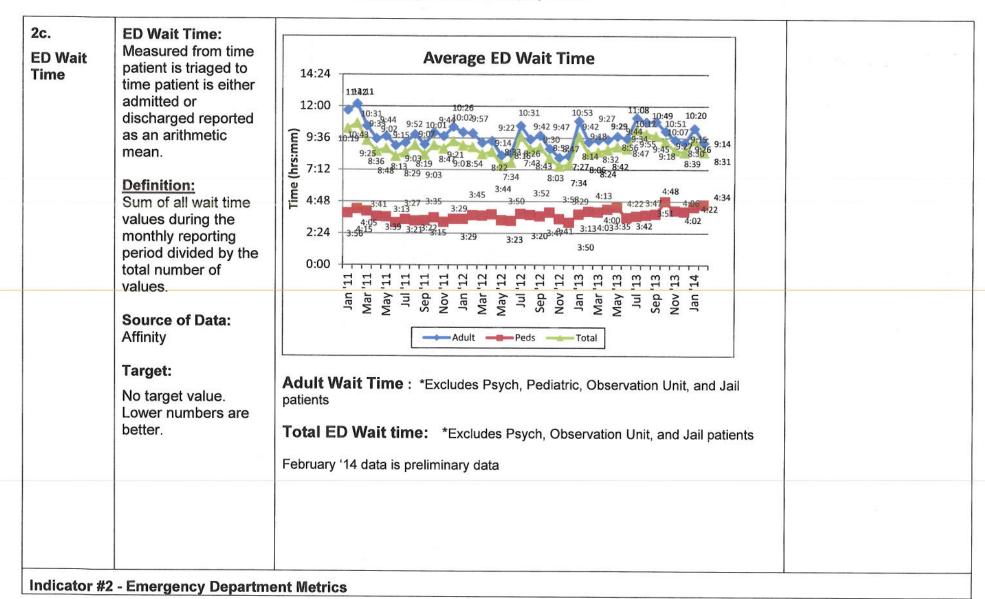


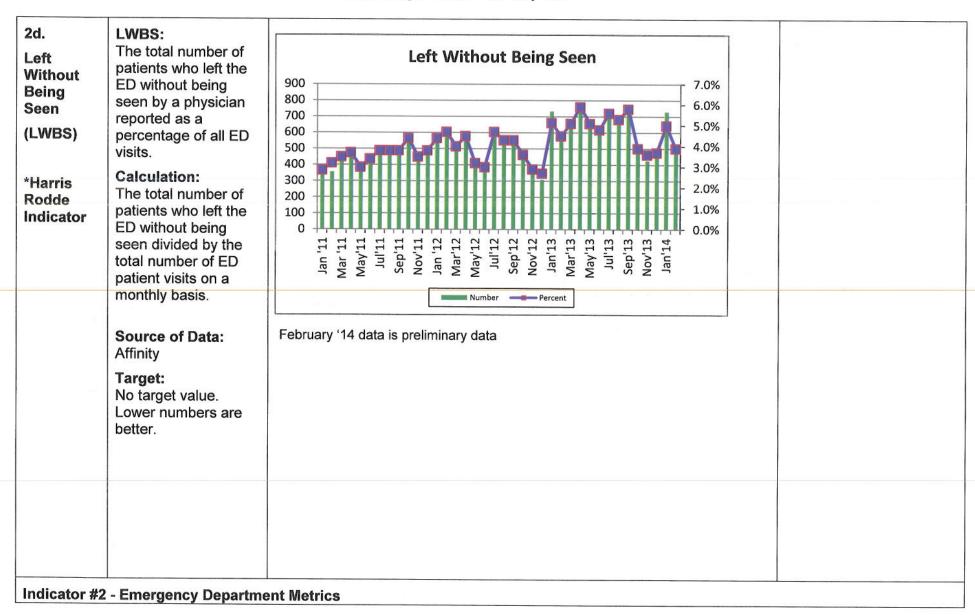


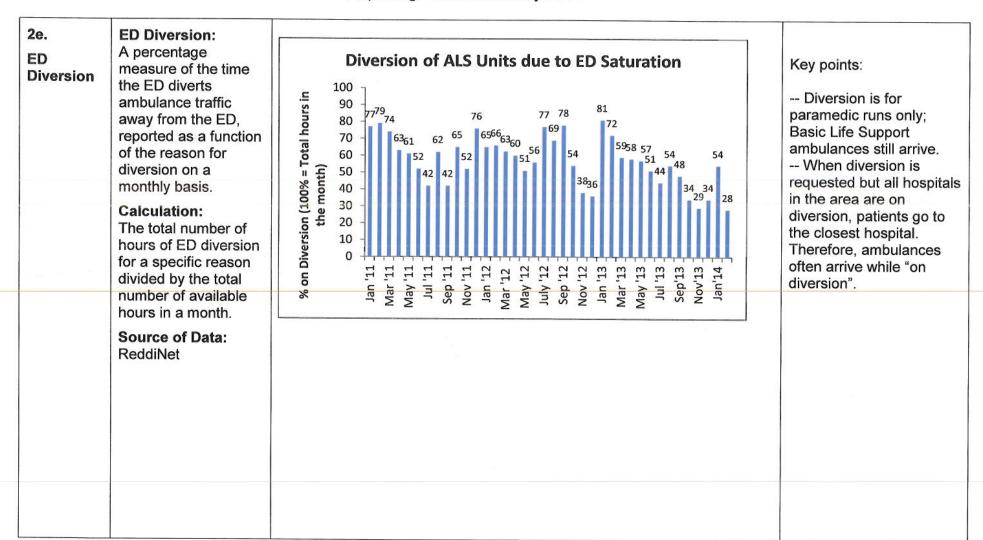


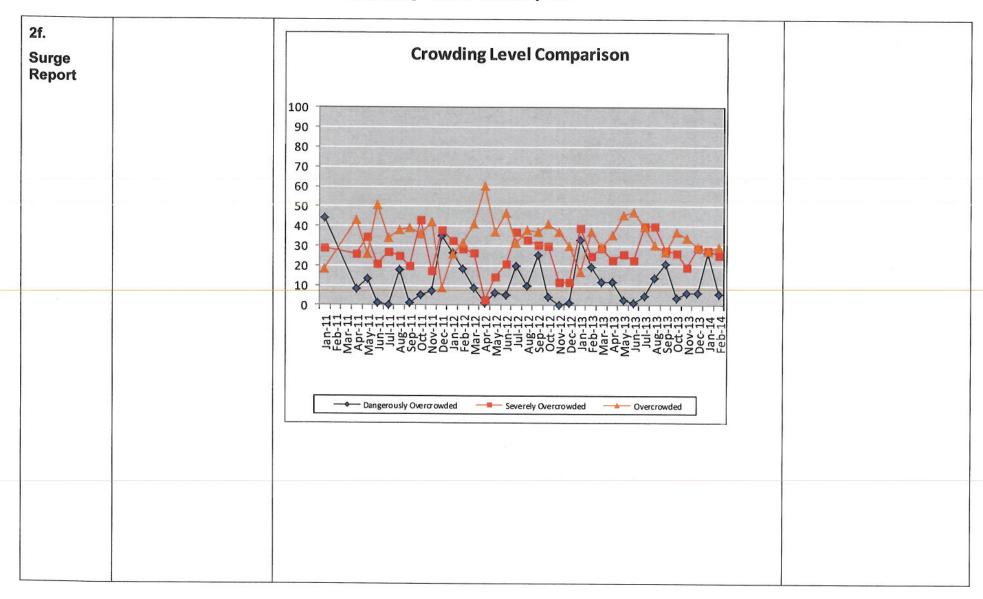
2b.  Median Emergency Department Boarding Time (EDBT)  *Harris Rodde Indicator	Boarding Time: Time from MD Admit time (effective date and time of pre-admit) to time the patient actually leaves the ED en route to assigned bed (effective date and time of the ED disposition).  Calculation: The middle value in the set of individual boarding times for the month arranged in increasing order. If there is an even number of values, then the median is the average of the middle two values.  Source of Data: Affinity	14:24   12:00   11:22   10:08   12:9:04   7:37   7:47	
	Target: Less than 7 hours.	El Control de la	



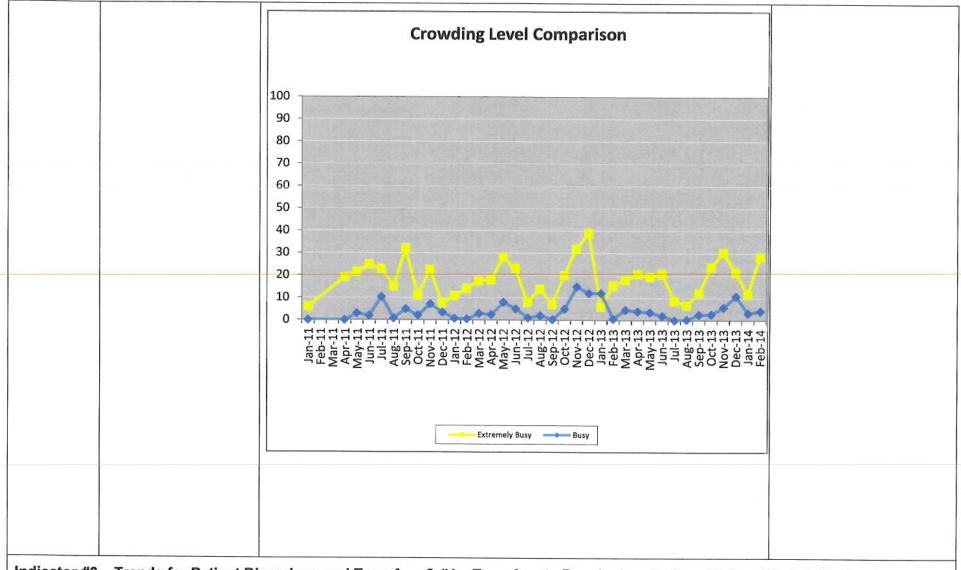






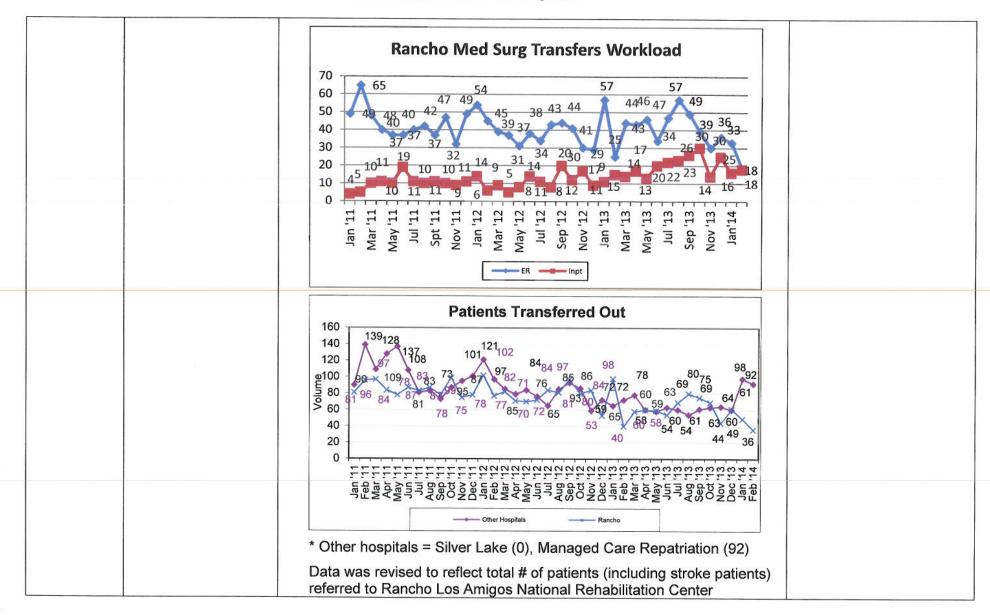


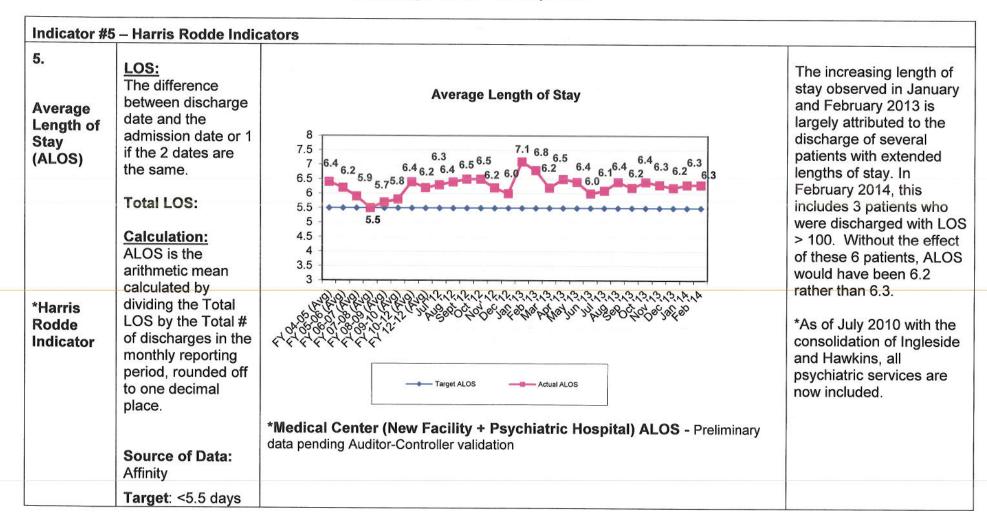
Operational Monitoring Report Reporting Period: February 2014



Indicator #3 – Trends for Patient Diversions and Transfers & #4 – Transfers to Rancho Los Amigos National Rehabilitation Center Metrics

3. & 4. Rancho	The volume of patients transferred to RLANRC for acute hospitalization from	Month of February '14 Referrals from ER:						
Los Amigos National			Med/Surg	Acute Stroke	Total			
Rehab- ilitation	the Emergency Department and from	# Met transfer criteria	0	NA	-			
Center	Inpatient Units.	# Referred to RLANRC	0	18	18			
(RLANRC) Transfers		# Transfers	0	18	18			
Transiers	Data Source: Manual record	# Denied	0	NA	-			
	keeping.	# Cancelled	0	NA	-			
	Canadiadastasas	# Patients Refused of Those Cancelled	0	NA	E			
	Cancelled category includes patients whose condition changed leading to higher level of care or discharge home.	Referrals from Inpatients:						
			Med/Surg	Acute Stroke	Total			
		# Met transfer criteria	20	NA	-			
		# Referred to RLANRC	20	1	21			
		# Transfers	17	1	18			
	5	# Denied	0	NA	-			
		# Cancelled	2	NA				
		# Patients Refused of Those Cancelled	0	NA	-			
		Other /Pending	1	NA	_			





6.	Census:	Date	NICU (40 Beds)	Peds Ward (25 Beds)	PICU (10 Beds)	Med/Surg Adolescent (20 Beds)	
Pediatric Bed	The total number	Jan-11	55%	60%	70%	70%	
Census and	admitted pediatric	Feb-11	57%	68%	80%	80%	
Occupancy (%)	inpatients at 12:00 AM	Mar-11	57%	60%	70%	75%	
	midnight of a designated pediatric	Apr-11	55%	64%	50%	75%	
	ward.	May-11	57%	56%	50%	80%	
Pediatric ICU	DATE OF VITAL	Jun-11	70%	52%	60%	75%	
PICU)	Occupancy:	Jul-11	58%	44%	50%	70%	
Neonatal ICU	The total number of	Aug-11	58%	44%	40%	75%	
(NICU)	admitted pediatric	Sep-11	58%	40%	50%	75%	
Pediatric Unit	inpatients divided by	Oct-11	55%	52%	60%	70%	
	the total number of	Nov-11	62%	60%	70%	75%	
Adolescent	licensed beds on that	Dec-11	65%	40%	60%	70%	
Unit	unit and reported as a percentage.  Source of Data: Affinity	Jan-12	60%	52%	60%	75%	
		Feb-12	55%	56%	60%	70%	
		Mar-12	55%	64%	50%	75%	
		Apr-12	53%	48%	50%	65%	
		May-12	42%	40%	50%	70%	
		Jun-12	38%	44%	50%	60%	
		Jul-12	45%	48%	60%	80%	
		Aug-12	57%	48%	50%	75%	
		Sep-12	63%	56%	50%	80%	
		Oct-12	58%	64%	60%	70%	
		Nov-12	63%	44%	50%	45%	
		Dec-12	73%	36%	60%	50%	
		Jan-13	63%	48%	70%	70%	
		Feb-13	50%	48%	70%	75%	
		Mar-13	53%	44%	60%	75%	

	Date	NICU (40 Beds)	Peds Ward (25 Beds)	PICU (10 Beds)	Med/Surg Adolescent (20 Beds)	
	Apr-13	53%	40%	50%	55%	
	May-13	43%	44%	60%	45%	
	Jun-13	48%	48%	50%	35%	
	Jul-13	48%	32%	50%	60%	
	Aug-13	45%	40%	40%	75%	
	Sep-13	48%	48%	40%	80%	
	Oct-13	53%	44%	40%	55%	
	Nov-13	43%	32%	50%	60%	
	Dec-13	40%	44%	40%	60%	
	Jan-14	45%	40%	50%	75%	
	Feb-14	53%	48%	40%	60%	
5						
2						
						7-
		6				

Indicator #7 – Me	d Surg / ICU / OB/GYN M	etrics						
7. Med Surg / ICU Bed Census	Census: The total number admitted inpatients at	Date	Med Surg (309 beds)	Jail (24 Beds)	ICUs (120 Beds)	Burn* (20 Beds)	OB/GYN (Med Surg) (32 beds)	
and Occupancy (%)	12:00 AM midnight of a designated ward.	Nov-12	87%	83%	83.5 %	51%	87%	
	Occupancy:	Dec-12	88%	71%	83%	44%	83%	
Medical	The total number of	Jan-13	95%	73%	85%	55%	98%	
Surgical Unit (Med Surg)	admitted inpatients divided by the total	Feb-13	93%	59%	87%	61%	95%	
	number of licensed beds on that unit and reported as a	Mar-13	91%	62%	82%	47%	93%	
Jail Unit (Jail)		Apr-13	88%	82%	85%	57%	99%	
	percentage.	May-13	88%	66%	82%	57%	90%	
ICUs (Excluding Burn ICUs)	Source of Data:	Jun-13	82%	71%	80%	60%	81%	
Buil 1003)	Affinity	Jul-13	88%	79%	82%	42%	88%	
OB/GYN Unit	- 11 2	Aug-13	93%	79%	83%	44%	91%	
(Med Surg)		Sep-13	95%	83%	83%	50%	100%	
		Oct-13	91%	72%	78%	59%	95%	
		Nov-13	91%	66%	82%	67%	83%	
		Dec-13	90%	73%	80%	60%	83%	
		Jan-14	92%	72%	86%	45%	93%	
		Feb-14	91%	79%	85%	53%	96%	
		* Burn= B	oth ward (10)	and ICUs (1)	0)			